

Virginia's Poultry Litter Transport Incentive Program

The Virginia Department of Conservation and Recreation and the Virginia Poultry Federation are offering a poultry litter transport incentive program to facilitate the efficient use of poultry litter as a crop nutrient source in areas that can most benefit from those nutrients and outside of the main poultry-producing counties. The goal of this program is to encourage the development of self-sustaining poultry litter markets outside of the Chesapeake Bay watershed. The program provides assistance at the rate of \$15 per ton of litter moved to help cover the additional costs associated with increased transport distances.

A. Who is eligible?

1. Poultry litter end-users
2. Poultry litter brokers

B. Program requirements:

1. **Poultry litter must originate on farms in Page or Rockingham counties.**
2. **To receive an incentive payment through this program, litter must be transported to a final destination outside of the Chesapeake Bay watershed** (see attached listing and map for eligible localities).
3. Up to 300 tons of litter may be eligible per applicant per incentive request. Subsequent requests may be submitted after a request for payment, with all forms completed, has been received on the previous request.
4. Completed "Poultry Litter Transport Incentive Request Forms" are valid for a period of 12 months from the date the request was received. If litter applications are not made within 12 months, a new form will have to be submitted for consideration.
5. Certified scale weight tickets for **all** tonnage moved are **required** to receive payment.
6. A Nutrient Management Plan (NMP) must be prepared by a nutrient management planner certified by the Virginia Department of Conservation and Recreation (DCR) for all fields scheduled to receive poultry litter.
7. The end-user agrees to fully implement their NMP.
8. Fields eligible for payment must have a Virginia Tech soil test phosphorus reading not exceeding the maximums shown in the following table:

Maximum Soil Phosphorus for Region ¹	Virginia Tech soil test reading ² , P lbs/acre (Mehlich I)
Eastern Shore and Lower Coastal Plain	270
Middle and Upper Coastal Plain and Piedmont	272
Ridge and Valley	324

¹To determine the region the field is in; refer to the attached list of eligible counties by region.

Virginia's Poultry Litter Transport Incentive Program

C. Program requirements: (continued)

1. Fields eligible for payment must have maximum phosphorus application rates determined using the "Soil Test Method" or the "Environmental Threshold Method" (as described in the *Virginia Nutrient Management Standards and Criteria, Revised October 2005*), with phosphorus applications **not to exceed crop removal phosphorus or crop nutrient needs determined by the soil test method**, whichever is greater.
2. The most recent poultry litter analysis results or an average of past nutrient analysis results for the specific operation within the last three-year period shall be used to determine the nutrient content of the poultry litter and final application rate for NMP development. If analysis is unknown at the time the NMP is written, litter analysis shown in Table 8-4 in the *Virginia Nutrient Management Standards and Criteria, Revised October 2005*, may be used to develop the initial NMP submitted with the "Request Form" for this program.
3. **No** mortality (composted or otherwise) will be shipped as part of this incentive program. Litter containing mortality in **any** form will **not** qualify for payment.
4. Litter with moisture greater than 35% is not eligible for payment.
5. The receiving farm must provide a safe off-loading site that does not pose an undue risk to water quality. These sites must be identified in the NMP.
6. The receiving farm must store litter in accordance with the requirements identified in the NMP "Special Conditions" and cover the litter if stored more than 14 days. Storage sites must be identified in the NMP.
7. Vehicles used to transport poultry litter, including any application equipment, must contain the poultry litter within the cargo area without loss while operating on a public road.
8. Spot checks for compliance with these program requirements may be performed by the Virginia Department of Conservation and Recreation.

Virginia's Poultry Litter Transport Incentive Program

D. How to Apply:

1. To apply for an incentive payment for litter transport, the applicant must complete and return the included "Poultry Litter Transport Incentive Request Form", a "Request for Taxpayer Identification Number and Certification (Substitute W-9) Tax Form", and a current NMP for the fields receiving litter to:
Poultry Litter Transport Incentive Program
Department of Conservation & Recreation
P.O. Box 1
Verona, VA 24482
2. Once the "Poultry Litter Transport Incentive Request Form" and NMP are received they will be reviewed by DCR. If you wish to be certain you are eligible before receiving litter, the incentive request must be accepted by DCR prior to litter transport. (Final payment will still be dependent upon receipt and approval of "Chain of Custody," "Field Application Record(s)," and certified scale weight tickets.)
3. Once a "Poultry Litter Transport Incentive Request Form" has been accepted for incentive payment and after litter has been applied, submit the following completed forms and items to the above address: "Chain of Custody," "Field Application Record," and certified scale weight tickets showing the litter tonnage transported.
4. These documents will be reviewed, and if approved will be processed for payment. The party who submitted the "Poultry Litter Transport Incentive Request Form" will then receive the incentive payment.

E. More Poultry Litter Transport Incentive Program Information

The following web address will take you to a description of the Virginia Poultry Litter Transport Incentive Program and downloadable forms needed for participation in the program:

http://www.dcr.virginia.gov/water_quality/nmlitter.shtml

F. Contacts

Cynthia Williams – (540) 332-9228; cynthia.williams@dc.virginia.gov
Robert Long – (434) 547-8172; bobby.long@dc.virginia.gov
Timothy Sexton – (804) 371-0061; timothy.sexton@dc.virginia.gov

Complete packets of information, including an explanation of the program and all forms needed to participate in the program, will be available upon request from any of the contacts listed above.

Virginia's Poultry Litter Transport Incentive Program

G. Counties ELIGIBLE to receive incentive payments BY REGION:

Eastern Shore and Lower Coastal Plain:

Southampton	Sussex
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Middle and Upper Coastal Plain and Piedmont:

Brunswick	Grayson	Mecklenburg
Carroll	Greensville	Patrick
Charlotte	Halifax	Pittsylvania
Floyd	Henry	
Franklin	Lunenburg	

Ridge and Valley:

Bland	Pulaski	Tazewell
Buchanan	Russell	Washington
Dickenson	Scott	Wise
Lee	Smyth	Wythe

H. PORTIONS of the following Counties are Eligible to receive incentive payments BY REGION (PLEASE CALL Cynthia Williams at the DCR Verona office at (540) 332-9228 to determine the specific eligibility of your location):

Eastern Shore and Lower Coastal Plain:

Chesapeake	Suffolk	Virginia Beach
Isle of Wight	Surry	

Middle and Upper Coastal Plain and Piedmont:

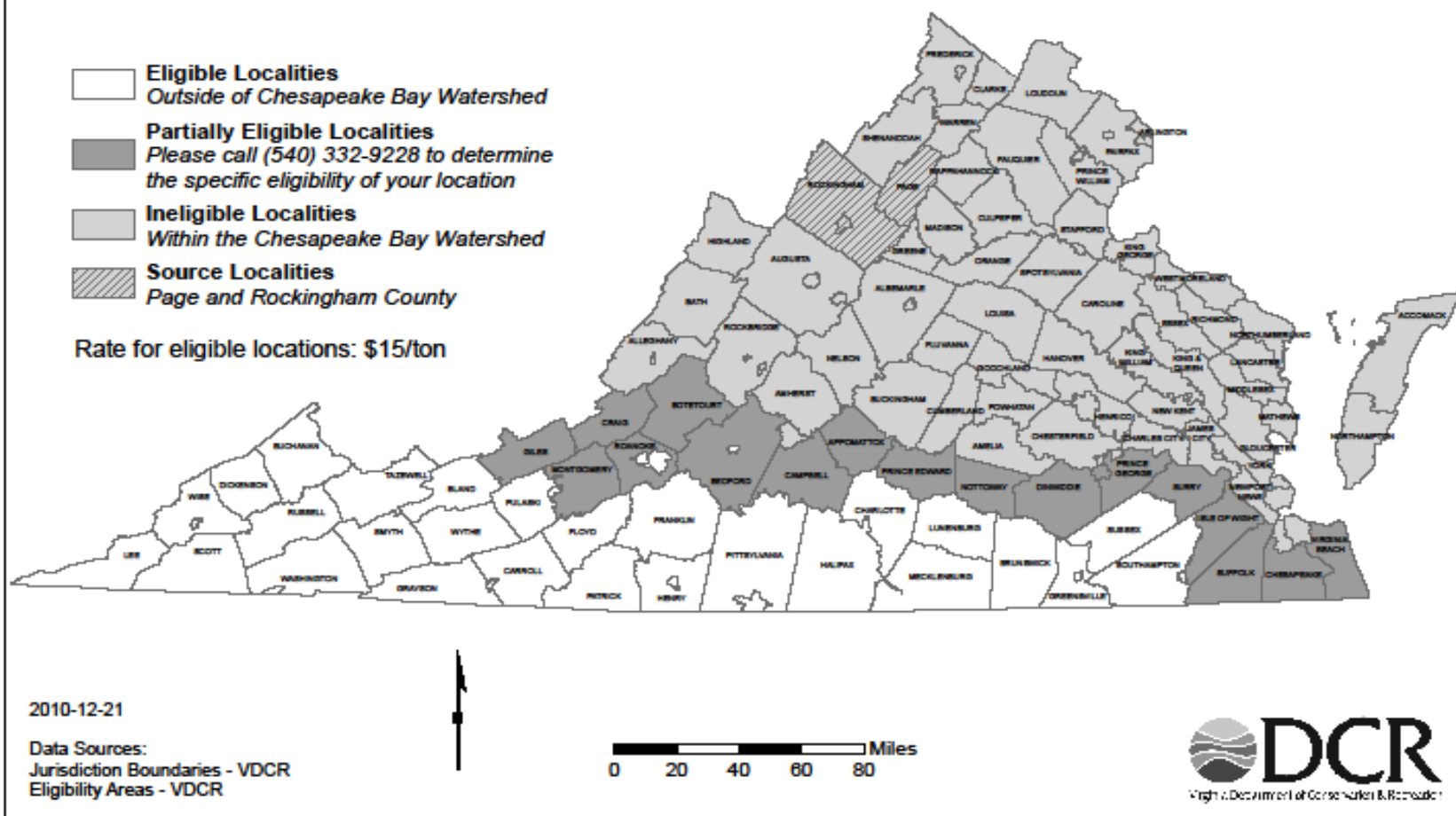
Appomattox	Dinwiddie	Prince George
Bedford	Nottoway	
Campbell	Prince Edward	

Ridge and Valley:

Botetourt	Giles
Craig	Roanoke

Virginia Department of Conservation and Recreation and Virginia Poultry Federation

Poultry Litter Transport Incentive Program



Poultry Litter Transport Incentive Request Form

Incentive Payment Applicant

Name: _____

Social Security # or: _____ **Federal Tax Identification #:** _____

Address: _____

County: _____

Contact Person: _____ **Telephone No.:** _____

Litter Broker ☐ **Poultry Litter End-User** ☐

Acreage for Application: _____ Tons of litter to be applied: _____

- **Attach a completed "Request for Taxpayer Identification Number and Certification (Substitute W-9) Tax Form."**
- 5. Attach a current Nutrient Management Plan (NMP) that includes all fields scheduled to receive poultry litter transported through this program.** (The plan must have been prepared by a nutrient management planner certified by the Virginia Department of Conservation and Recreation.) **Litter must be applied as specified in the nutrient management plan.**
- 6. Up to 300 tons of litter may be eligible per applicant, per incentive request.
- 7. Fields scheduled to receive poultry litter transported through this program must have a Virginia Tech soil test phosphorus reading not exceeding the maximums shown in the program description (pg. 1) and scheduled applications that do **not** exceed crop removal phosphorus or needed phosphorus (based on "Soil Test Method"), whichever is greater.
- 8. **No** mortality (composted or otherwise) will be shipped as part of this incentive program. Litter containing mortality in **any** form will **not** qualify for payment.
- 9. Poultry litter must originate on farms in Page or Rockingham counties.
- 10. To receive an incentive payment through this program, litter must be transported to a final destination outside of the Chesapeake Bay Watershed.**
- 11. The receiving farm must provide a safe off-loading site that does not pose an undue risk to water quality. These sites must be identified in the NMP.
- 12. The receiving farm must store litter in accordance with the buffer requirements identified in the NMP "Special Conditions", and cover the litter if stored more than 14 days. These sites must be identified in the NMP.
- 13. Completed "Poultry Litter Transport Incentive Request Forms" are valid for a period of 12 months. All forms and documents required for payment must be submitted within **60 days** of the litter application. If litter applications are not made within 12 months of the request, a new form must be submitted.
- 14. Virginia DCR and the Virginia Poultry Federation assume no liability regarding quality of poultry litter transported and applied under this program.

Signature _____ Date ____/____/____

For DCR Use Only

Approved ☐ Yes ☐ No

Tracking Number _____

Authorized Signature _____ Date: _____

Tonnage Overrun _____ Date Approved: _____

Substitute Form W-9 Each person/organization doing business with the Commonwealth must provide the following information or be subject to backup withholding.

4 Provide a **general** description of goods/services to be sold to the Commonwealth: **Poultry Litter Transport Incentive Program**

0*	<input type="checkbox"/> Other	6	<input type="checkbox"/> Corporation	A*	<input type="checkbox"/> Partnership
2	<input type="checkbox"/> Federal Agency	7*	<input type="checkbox"/> Sole Proprietor/Reportable Individual	B*	<input type="checkbox"/> Estate
3	<input type="checkbox"/> State Agency	8*	<input type="checkbox"/> Medical Corporation	C*	<input type="checkbox"/> Trust
4	<input type="checkbox"/> Local Government	9	<input type="checkbox"/> Non-Reportable Individual	D*	<input type="checkbox"/> Limited Liability Company
5	<input type="checkbox"/> Political Subdivision				

* Indicates vendor may be eligible to receive a form 1099

LEGAL NAME _____

TRADE NAME

Order Address

Contact Person _____ Telephone No. _____

E-mail Address _____ FAX No. _____

Remittance Address

Contact Person	Telephone No.
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THIS BUSINESS IS CERTIFIED BY THE VIRGINIA DEPARTMENT OF MINORITY BUSINESS ENTERPRISE AS:

☐ Small ☐ Woman-Owned ☐ Minority-Owned

For information on VDMBE certification, visit their website at www.dmbv.virginia.gov or call them at 804-786-6585

CERTIFICATION

Under penalties of perjury, I certify that:

1. The number(s) shown on this form is/are my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: [a] I am exempt from backup withholding, or [b] I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of a failure to report all interest or dividends, or [c] the IRS has notified me that I am no longer subject to backup withholding.

Certification Instructions - You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of under reporting interest or dividends on your tax return.

Signature _____ Date _____

Poultry Litter Transport Incentive Chain of Custody

Return this Form to:
Poultry Litter Transport Incentive Program
Dept. of Conservation & Recreation
P.O. Box 1
Verona, VA 24482

SOURCE of the POULTRY LITTER

Name:			
Address:			
Contact Person:		Telephone No.	
Tons of litter		County: <input type="checkbox"/> Rockingham, HU Code-	<input type="checkbox"/> Page, HU Code-

The above information is correct to the best of my knowledge. Further, I agree to the following requirements:

- Provide a copy of the most recent poultry litter analysis.
- Permitted operations must comply with all Poultry Waste Management Regulations requirements.
- No mortality (composted or otherwise) will be shipped as part of this incentive program.

Grower Signature _____ Date _____

POULTRY LITTER BROKER/TRANSPORTER

Name:			
Address:			
Contact Person:		Telephone No.	
Tons of litter shipped:			

The above information is correct to the best of my knowledge. Further, I agree to the following requirements:

- Vehicles transporting poultry litter, including any application equipment, will contain the manure within the cargo area without loss while operating on a public road.
- Brokers must comply with the reporting requirements of the Poultry Waste Management Regulations.
- No mortality (composted or otherwise) will be transported as part of this incentive program.

Broker/Transporter Signature _____ Date _____

END-USER OF POULTRY LITTER

Name:			
Address:			
Contact Person:		Telephone No.	
Tons of litter received:		County:	HU Code:

The above information is correct to the best of my knowledge. Further, I agree to implement a current nutrient management plan prepared by a nutrient management planner certified by the Virginia Department of Conservation and Recreation that includes the use of poultry litter as a crop nutrient source.

End-user Signature _____ Date _____

Recipient of Incentive payment. (Same person who submitted "Poultry Litter Transport Incentive Request Form")

Name:	
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Signature _____ Date _____

Virginia's Poultry Litter Transport Incentive Program

Maximum Eligible Phosphorus Soil Tests Values by Laboratory and Region

Region	Soil Testing Laboratories								
	VA Tech (M I)	A&L Eastern (M III)	Brookside (M III)	Spectrum Analytic (M III)	Waters Ag Labs (M I)	Agri-Analysis (M III)	Logan Labs (M III)	AgroLab (MIII)	Midwest Nebraska (M III)
Eastern Shore and Lower Coastal Plain	270 lbs P	253 ppm P	1150 lbs P ₂ O ₅	506 lbs P	270 lbs P	506 lbs P	1150 lbs P ₂ O ₅	253 ppm P	253 ppm P
Middle and Upper Coastal Plain and Piedmont	272 lbs P	254 ppm P	1155 lbs P ₂ O ₅	508 lbs P	272 lbs P	508 lbs P	1155 lbs P ₂ O ₅	254 ppm P	254 ppm P
Ridge and Valley	324 lbs P	281 ppm P	1277 lbs P ₂ O ₅	562 lbs P	324 lbs P	562 lbs P	1277 lbs P ₂ O ₅	281 ppm P	281 ppm P
M I = Labs using Mehlich I procedure. M III = Labs using Mehlich III procedure Specific counties for each Region are identified on page 32 of the "Virginia Phosphorus Index, Version 2.0" Table A.1.									

Poultry Litter Transport Incentive Field Application Record

Return Completed form to:
Poultry Litter Transport Incentive Program
Dept. of Conservation & Recreation
P.O. Box 1
Verona, VA. 24482

END-USER OF POULTRY LITTER:

Name: _____ **Source County:** _____

Address: _____ **Receiving County:** _____

Telephone No.: _____

FIELD INFORMATION

(Include **all** fields receiving litter)

Tract No.	Field No.	Acres Receiving Poultry Litter	Application Date	Tons Applied (Total)	Crop	Soil Test P*	Eligible (Yes/No)
TOTAL:			TOTAL:				

*Please indicate soil testing lab used: _____

I certify the above information is true to the best of my knowledge

Signature: _____ **Date:** _____

Poultry Litter Transport Incentive Field Application Record (Supplemental Form for Additional Fields)

Return Completed form to:
Poultry Litter Transport Incentive Program
Dept. of Conservation & Recreation
P.O. Box 1
Verona, VA 24482

FIELD INFORMATION

(Include **all** fields receiving litter)

Tract No.	Field No.	Acres Receiving Poultry Litter	Application Date	Tons Applied (Total)	Crop	Soil Test P*	Eligible (Yes/No)
TOTAL:			TOTAL:				

*Please indicate soil testing lab used: _____

I certify the above information is true to the best of my knowledge

Signature: _____ **Date:** _____

